

IN THE UNITED STATES DISTRICT COURT FOR THE
WESTERN DISTRICT OF TENNESSEE
WESTERN DIVISION

MAX R WADE

(Enter above the full name of the plaintiff
or plaintiffs in this action.)

vs.

Sheriff JOHN MEHR

MAYOR SCOTT LONGER

MADISON COUNTY GOVERNMENT OFFICIAL

(Enter above the full name of the defendant
or defendants in this action.)

RECEIVED BY
JAN 11 2022
Thomas M. Gould, Clerk
U.S. District Court
W.D. OF TN, Jackson

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS UNDER 42 U.S.C., §1983

I. Previous Lawsuits

A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? Yes () No (x)

B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

1. Parties to this previous lawsuit

Plaintiffs: _____

Defendants: _____

2. Court (if federal court, name the district; if state court, name the county): _____

3. Docket Number: _____

4. Name of judge to whom case was assigned: _____

5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?) _____

6. Approximate date of filing lawsuit: _____

7. Approximate date of disposition: _____

- II. Place of Present Confinement: Madison County Jail CTC
- A. Is there a prisoner grievance procedure in the institution? Yes () No (X)
- B. Did you present the facts relating to your complaint in the state prisoner grievance procedure? Yes () No (X)
- C. If your answer is Yes:
1. What steps did you take? _____
 2. What was the result? _____
- D. If your answer is No, explain why not: There is not a procedure at the institution

III. Parties
(In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of Plaintiff Max R Wade
Address 515 South Liberty St Jackson TN 38301

(In item B below, place the full name of the defendant in the first blank, his official position in the second blank, and his and his place of employment in the third blank. Use Item C for the names, positions, and places of employment of an additional defendants.)

B. Defendant Sheriff John Mehr Mayor Scott Conner is employed as Madison County Government Officer
at Jackson TN

C. Additional Defendants: _____

IV. Statement of Claim

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach extra sheet if necessary.

Cruel and unusual punishment: The following conditions and practices amount to cruel and unusual punishment: 1) Double celling inmates crowded conditions, 2) Confinement of any inmates for more than one week duration in a cell not equipped with hot water, 3) Confinement of inmates in buildings unfit for human habitation, 4) Failure to maintain minimum sanitary conditions in the food storage, preparation, and service areas, 5) Failure to adequately protect inmates from the likelihood of violent attack, 6) Failure to provide minimally adequate medical care for inmates, 7) Confinement of inmates in segregation status for more than one week without any opportunity for physical exercise.

V. Relief

State briefly exactly what you want the court to do for you. Make no legal arguments.

Cite no cases or statutes.

Stop cruel and unusual punishment, stop overcrowding, stop
black mold, black mold that is festering making everyone sick.

Compensate me with One million dollars and no cents

VI. Jury Demand

I would like to have my case tried by a jury. Yes (✓) No ().

I (We) hereby certify under penalty of perjury that the above complaint is true to the best of our information, knowledge, and belief.

Signed this 16th day of December, 20 21.

Max Wade
MAX WADE

(Signature of Plaintiff/Plaintiffs)